



State of Washington  
Application for a Water Right Permit

☐ SURFACE WATER ☒ GROUND WATER  
☒ Permanent ☐ Temporary ☐ Short Term

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE **MINIMUM** FEE OF \$50.00 PAYABLE TO  
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

For Ecology Use  
(Date Stamp)

RECEIVED

OCT 04 2011

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE

RECEIVED

OCT 17 2011

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE

Section 1. APPLICANT

Applicant/Business Name: Monty and Phyllis Moore	Phone No: 206-617-4521	Other No: 206-399-5944
Address: P.O. Box 447		
City: Snohomish	State: WA	Zip: 98291
Email Address (optional): montlm@aol.com ; pacranroof@aol.com		

Contact Name (if different from above): Traci Shallbetter	Phone No: (509) 674-3836	Other No: (509) 260-0037
Relationship to Applicant: Attorney for SwiftWater Ranch, LLC--SwiftWater Ranch Water Trust		
Address: Shallbetter Law, 3201 Airport Road		
City: Cle Elum	State: WA	Zip: 98922
Email Address (optional): traci@shallbetterlaw.com		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: New groundwater rights for three single family residences  
(one on each of three lots) offset by mitigation water from SwiftWater Ranch Water Trust Program (CS4-  
0225(A)CTCL@2). Applicant property has an exempt well with Well Tag 192, as part of an approved Group B  
system.

Anticipated length of time to complete your project: 20 years

**Water Use** List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Domestic Use for three single-family residences (350 gpd per residence)	28 gpm	1.176 AF/year	Continuous
500 square feet of irrigation per residence		0.066 AF/year	May 1-Sept. 15
TOTAL:		1.242 AF/year	

For Ecology Use	APPLICATION NO: _____ SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____ ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____ Priority Date _____ By _____ WR1A: _____



**Short Term/Temporary Water Use**

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_

For Ecology Use	APPLICATION NO: _____		SEPA: Exempt/Not Exempt
	Fee Paid: _____	Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____	By _____ WRIA: _____



Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

<b>A.) If Surface Water Source</b>	<b>B.) If Ground Water Source</b>
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: <u>APG 192</u>
Source Name: _____	Well diameter & depth: <u>6 in; 124 feet</u>
Tributary to: _____	Number of proposed points of withdrawal: _____
Number of proposed diversion points: _____	Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test. Well Tag ID No. <u>APG 192</u>

<b>C.) Point of Diversion/Withdrawal – Legal Description</b>						
Parcel No.	¼	¼	Section	Township	Range	County
953359 (well) 953360 953361	SE		7	19	15E	Kittitas
Lot(s)	Block(s)		Subdivision			
Lots 2, 3, and 4			Carmel Views Plat			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input checked="" type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____.						
Parcel No.	¼	¼	Section	Township	Range	County
953359	SE	NE	7	19	15E	Kittitas
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet ( <input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet ( <input type="checkbox"/> East/ <input type="checkbox"/> West) from the ( <input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____.						

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO  
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO  
Provide the owner name(s), address, and phone number: \_\_\_\_\_  
\_\_\_\_\_

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Lots 2, 3, and 4 of Carmel Views Plat, according to the Plat recorded in Volum 11 of Plats at pages 24 through 25, records of Kittitas County, Washington

¼	¼	Section	Twp.	Range	County	Parcel No.
		7	19N	15E	Kittitas	953359
		7	19N	15E	Kittitas	953360
		7	19N	15E	Kittitas	953361

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO  
Provide owner name(s), address, and phone number: \_\_\_\_\_  
\_\_\_\_\_

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO

If yes, provide the water right and/or claim numbers: Applicant is under contract with SwiftWater Ranch, LLC to purchase 0.411 AF/year (0.137 AF/year per residential unit/connection) of water from the SwiftWater Ranch Water Trust Program (CS4-02255(A) CTCL@2) to mitigate the proposed consumptive use



Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): The water system will consist of developing the existing well(s) located within the proposed place of use and/or developing a new well(s) as needed to supply the proposed services. The ground water will be pumped into storage, and disttribution lines will convey the water from storage to serve the connections. The source capacity, source water quality, storage capacity, distribution lines, and service lines will be designed and installed in accordance with the standards and specifications of the Washington State Department of Health and Kittitas County Fire Code. In addition, source and service meters will be installed to insure the system operates within its water rights.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only <small>(defined under RCW 90.03.015)</small>
Projected number of connections to be served: <u>3</u>	Present population to be served water: _____
Type of connections: <u>3 single family residences</u> <small>(e.g., home, recreational cabin)</small>	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved <u>April/28/2009</u> Water System Number: <u>AC3254</u>	
Name of water system: <u>CARMEL VIEWS</u>	
Are you within the service area of an existing water system? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: <u>The three lots are part of the CARMEL VIEWS Group B Water System. We are unable to connect due to the water moratorium. This permit is being submitted in order to obtain the right to connect to the Group B water system in light of our purchase of groundwater mitigation rights from the SwiftWater Ranch Water Trust.</u>	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation



Total number of acres requested to be irrigated under this application = 500 sf per lot (total of 1500 sf for the three lots) \_\_\_\_\_ ACRES

NOTE: Outline the area to be irrigated on your attached map.

**Stockwater**

List number and kind of stock: N/A \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the proposed project for a dairy farm? ☐ YES ☒ NO

**Other Proposed Farm Uses**

Describe all proposed uses: None \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Family Farm Water Act (RCW 90.66):**

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: \_\_\_\_\_

**Section 8. OTHER WATER USES**

**Hydropower**

Indicate total feet of head \_\_\_\_\_ and proposed capacity in kilowatts: \_\_\_\_\_

Describe works: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Indicate all uses to which power is to be applied: \_\_\_\_\_

FERC License No: \_\_\_\_\_

**Mining/Industrial Use**

Describe use, method of supplying and utilizing water: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Other Use**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 9. WATER STORAGE**

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☒ YES ☐ NO

If you answered yes to any of the above questions, please describe: \_\_\_\_\_

\_\_\_\_\_



NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

#### Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Address: \_\_\_\_\_

#### Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Monty D. Moore  
Print Name  
(Applicant or authorized representative)

Monty D. Moore  
Signature

9-30-11  
Date

Monty D. Moore  
Print Name  
(Landowner of Place of Use)

Monty D. Moore  
Signature

9-30-11  
Date

Monty D. Moore  
Print Name  
(Landowner of Place of Use)

Monty D. Moore  
Signature

9-30-11  
Date

Monty D. Moore  
Print Name  
(Landowner of Place of Use)

Monty D. Moore  
Signature

9-30-11  
Date

Submit your application to: DEPARTMENT OF ECOLOGY  
CASHIERING SECTION  
PO BOX 5128  
LACEY WA 98509-5128

Please check the region in which your proposed project is located.

☐ Southwest ☐ Northwest ☒ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

Enclosures:

Well Log APG 192  
Group B Approval AC 3254  
Septic Restrictive Covenant  
Site Maps  
Groundwater Mitigation Contract